DECLARATION TEACH TEACH OF DESIGN PATENT APPLICATION (37 CFR 1.63)

___ Decl. Sub. w/Initial Filing X Decl. Sub.
after Initial
Filing (surcharge
(37 CFR 1.15 (e))

Attorney Docket No.: 2132.105
Inventor Name: Jackowski et al.

COMPLETE IF KNOWN

Application No: 09/991,795

Filing Date: 11/23/01 Group Art Unit: 1741

Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTER APHA TRYPSIN INHIBITOR BIOPOLYMER MARKERS INDICATIVE OF INSULIN RESISTANCE

the specification which			
is attached hereto OR X was filed on November 23, Appln. No. 09/991,795 and v			
I hereby state that I have revi identified specification, inclu specifically referred to above.	ding the claims, as		
I acknowledge the duty to disc defined in 37 CFR 1.56.	lose information whic	ch is material to	patentability as
Thereby claim foreign priority application(s) for patent or in international application which states of America, listed belowany foreign application for patapplication having a filing datable.	nventor's certificate n designated at least w and have also ident tent or inventor's ce	e, or 365(a) of a cone country oth dified below, by ertificate, or an	any PCT her than the United checking the box, by PCT international
PRIOR FOREIGN COUNTRY:	FOREIGN FILING	PRIORITY	CERTIFIED COPY
NUMBERS:	DATE:	NOT CLAIMED:	Yes No
			1
Additional foreign appln. nos. are attached hereto.	• •		
I hereby claim the benefit under application(s) listed below:	er 35 U.S.C. 119(e) o	of any United Sta	ites provisional
APPLICATION NUMBER(s):	FILING DATE:		
		Nos. are Supplemen	rovisional appln. listed on a ntary priority data D/SB/02B attached.

DECLARATION - UTILITY or DESIGN PATENT APPLICATION

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. PARENT APPLICATION or PCT NUMBER:	PARENT FILIN		ARENT PATENT NO: (if applicable)
Additional U.S. or PCT interpriority data sheet PTO/SB/			n a supplemental
As a named inventor, I hereby prosecute this application and Office connected therewith: X	appoint the fold to transact all	lowing registered L business in the	PATENT AND TRACEMARK PLACE CUSTOMER No.
	OR		BAR CODE LABEL HERE
Registered	practitioner(s)	name/registration	on no. listed below.
NAME: REGISTRATI		NAME:	REGISTRATION NO:
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110	Customer	Joseph Beckman Erin Monahan	45,529 48,804
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P.	Or Bar Code Labe	Erin Monahan Number OR	•
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P. ADDRESS: 4440 PGA Blvd.,	Or Bar Code Labe	Erin Monahan Number OR	48,804
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P. ADDRESS: 4440 PGA Blvd.,	Or Bar Code Labe A. STATE: I	Erin Monahan Jumber OR 1 Correspond	48,804 dence address below ZIP: 33410
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P. ADDRESS: 4440 PGA Blvd., ADDRESS: Suite 402	STATE: In TELEPHONE: (Station and belief the with the knowled by fine or important)	FL 661) 625-6575 ein of my own known are believed to bedge that willfurisonment, or both	ZIP: 33410 FAX: (561) 625-6572 Dwledge are true and that be true; and further all false statements and oth, under 17 U.S.C. 1003
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P. ADDRESS: 4440 PGA Blvd., ADDRESS: Suite 402 CITY: Palm Beach Gardens COUNTRY: U.S. I hereby declare that all state all statements made on information that these statements were made that like so made are punishable and that such willful false statement and that such willful false statements were made and that such will false statements were made and that such will false statements were made a	STATE: I TELEPHONE: (5 tements made here ation and belief de with the knowl le by fine or implicatements may ject	FL 661) 625-6575 ein of my own known are believed to be	ZIP: 33410 FAX: (561) 625-6572 Dwledge are true and that be true; and further all false statements and oth, under 17 U.S.C. 1003
Michael A. Slavin 34,016 Ferris H. Lander 43,377 C. Fred Rosenbaum 27,110 DIRECT ALL CORRESPONDENCE TO: NAME: McHale & Slavin, P. ADDRESS: 4440 PGA Blvd., ADDRESS: Suite 402 CITY: Palm Beach Gardens COUNTRY: U.S. I hereby declare that all state all statements made on information that these statements were made that these statements were made that such willful false stor any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR	STATE: I TELEPHONE: (5 tements made here ation and belief de with the knowl le by fine or implicatements may ject	FL 661) 625-6575 ein of my own known are believed to be	ZIP: 33410 FAX: (561) 625-6572 Dwledge are true and that be true; and further all false statements and oth, under 17 U.S.C. 1001 idity of the application ed for this unsigned inv

NAME OF SECOND INVENTOR: A Petition	has been filed for this unsigned inv.			
GIVEN NAME (first and middle [if any]):	FAMILY NAME OR SURNAME:			
John John	Marshall, PhD			
Inventor's signature:	Date:			
Residence: 95 Parks de Drive	· · · · · · · · · · · · · · · · · · ·			
City: Toronto State: ONTARIO M6R 2V3	Country: CANADA Citizenship: Canadian			
Post Office Address: 95 Parkside Drive, Toronto Ontario M6R 2V3, CANADA				
Additional inventors are being named on the	Supplemental additional inventor(s			